



# **HIV/AIDS ISSUES**

#### IN ALBERTA:

#### THE 1998 SURVEY OF ADULTS

Prepared for:

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### 1. Survey Highlights

#### The Study

- The 1998 HIV/AIDS Issues in Alberta Survey is the seventh in a series of studies funded by Alberta Health. Previous surveys were conducted in 1996, 1995, 1994, 1993, 1992 and 1990.
- For the 1998 survey, a random sample of 1202 respondents
  representing the general population of adult Albertans was
  interviewed by telephone. The sample was selected by random
  digit dialing.

#### Contact with Persons with HIV or AIDS

• Twenty percent (20%) of adult Albertans in 1998 indicated that they have personally known someone with HIV or AIDS, up significantly from 18% in 1996, 16% in 1994 and 9% in 1990.

### **Protecting Self from HIV Infection**

 Ninety-seven percent (97%) of respondents said that they knew how to protect themselves from HIV infection, up significantly from 92% in 1996. When asked "How?" responses dealt primarily with sexual behaviour, particularly the use of condoms and safer/protected sex.

### Testing for HIV

• Sixty-six percent (66%) of respondents correctly believed that

people who give blood donations are automatically tested for HIV. Almost one person in four (22%) incorrectly believed that blood donors are not tested while 13% said that they did not know. Thirty-nine percent (39%) of respondents correctly believed that pregnant women are automatically tested for HIV. Forty percent (40%) incorrectly believed that pregnant women are not tested while another 20% said that they did not know.

- Seventeen percent (17%) of respondents incorrectly believed that persons admitted to hospital are automatically tested for HIV and another 15% said that they did not know. Twenty-four percent (24%) of respondents incorrectly believed that persons admitted to prisons are automatically tested for HIV and another 32% said that they did not know. Over half of all respondents (57%) incorrectly assumed that people who go to STD clinics are automatically tested for HIV and another 16% did not know.
- Over a third of respondents (36%) endorsed the testing of people's blood for the AIDS virus without their knowledge.

### Public Education Regarding HIV/AIDS

 The majority of respondents said that condoms should be available in senior high schools (72%) and in junior high schools (50%). The great majority (85%) said that proper condom use should be taught in schools and 65% said that such teaching should take place in junior high school.

- Four out of ten respondents (41%) said that they did not know if students were getting adequate HIV and AIDS education in school. The remainder were evenly divided -- 29% felt that students were getting adequate HIV and AIDS education while 30% felt that students were not. These perceptions were very similar in 1998 and 1996.
- Persons who felt that students were getting adequate HIV/AIDS education in school emphasized the quality of the curriculum and their perceptions that young people appeared to be well-informed. Others observed that they themselves had been well-informed at school. Persons who felt that students were not getting adequate HIV/AIDS education in school perceived that the issue was not sufficiently addressed in the school curriculum and observed that young people feel invincible. Some felt that the prevalence of HIV/AIDS, teenage pregnancy, and risky sexual behaviour indicated the inadequacy of school instruction. Others cited discomfort with discussions of HIV and AIDS as a reason for the inadequacy of HIV/AIDS instruction at school.
- One-third (34%) said that condoms were very effective in preventing HIV/AIDS. The majority, however, said that condoms were somewhat effective (62%) and a small minority (3%) said that they were not at all effective. This pattern of responses was unchanged from 1992 to 1998. Respondents who said that condoms were somewhat effective or not at all effective tended

to feel that condoms were not a guarantee because of possible breakage, defects or leakage. Furthermore, many observed that "nothing is foolproof" and that "accidents can happen."

- Respondents were asked if they thought that frank messages to encourage people to change sexual behaviours through which HIV infection can be spread should appear in selected media. Ninety-two (92%) of respondents endorsed the placement of frank messages on the Internet. Similarly, a substantial majority felt that frank messages should appear in newspapers (90%), television (87%), radio (86%), posters (86%), transit ads (79%) and billboards (72%). These figures increased significantly from 1993 to 1998 for posters and transit ads. Less than 1% of respondents said that such messages should not appear anywhere at all.
- Ninety percent (90%) said that pamphlets are a useful resource to learn about HIV/AIDS. Respondents indicated that information on HIV/AIDS was available from a health centre, medical clinic, doctor's office, hospital or drug store.
- The majority of respondents (63%) in 1998 said that Alberta
  Health should provide more public health messages, up
  significantly from 56% in 1996. Only 1% of respondents said
  that Alberta Health should provide less public information on
  HIV/AIDS.

### Care and Support of Persons with HIV or AIDS

Fifteen percent (15%) of respondents said yes to the question
 "Are there barriers to people with HIV or AIDS receiving care
 and support in your community?" These respondents then listed
 the following barriers: prejudice, discrimination, stigmatization,
 fear, lack of knowledge, lack of education, lack of medical
 facilities and lack of funding for health care.

### 2. Description of the Survey

#### Background

The 1998 HIV/AIDS Issues in Alberta Survey is the seventh study of adult Albertans conducted for Alberta Health by the Population Research Laboratory of the Department of Sociology at the University of Alberta. The previous surveys were done in 1996, 1995, 1994, 1993, 1992 and 1990. The 1998 study repeats a number of questions asked on previous surveys in order to facilitate the assessment of trends in public perception, opinion and behaviour (see Appendix 1).

#### **Objectives**

The first objective of the 1998 survey was to measure the following: knowing anyone with HIV or AIDS; knowledge about how to protect oneself from HIV; knowledge and opinions regarding testing for HIV; opinions regarding instruction in school about condoms and about the availability of condoms in schools; opinions regarding adequacy of HIV/AIDS education; opinions regarding effectiveness of condoms; opinions regarding public information about HIV/AIDS issues; and opinions regarding the care and support of persons with HIV/AIDS in the community. The second objective was to compare responses from the 1998 survey with responses to previous surveys to assess change in public opinion, knowledge and behaviour regarding HIV/AIDS.

#### Sample

The relevant population for the 1998 Alberta Survey was all persons 18 years of age and older, residing in Alberta, and accessible by telephone. Separate samples were selected for Edmonton, Calgary, and the remainder of Alberta. These samples were combined using appropriate weights so as to constitute a representative sample of adult Albertans. The sampling procedure involved two stages. First, households were selected using random digit dialing. Second, an adult respondent was selected from each household so that an equal number of males and females were interviewed. There was a total of 1202 respondents with a response rate of 58%.

#### **Data Collection**

Interviews were conducted by telephone from December 7-17 of 1998 and from January 4 to February 1 of 1999.

### **Questionnaire**

The annual Alberta Survey covers a variety of topics which change from year to year. Standard socio-demographic data (e.g., age, sex, education) are obtained for each survey. The 1998 survey questions dealing with HIV/AIDS issues are attached in Appendix 2.

#### **Profile of Respondents**

The quota sampling for males and females produced a balanced sample with respect to gender. Median age was 40. One in four respondents were never married, while six in every ten were currently married or living common-law. The remainder (one in seven) were separated, divorced or widowed. Almost three in four were currently employed in the paid labour force; almost 5% of respondents were unemployed and looking for work. Median number of years of schooling was 14. Regarding religion, 48% were Protestant, 27% were Catholic, 5% were other religions, and 20% claimed no religion. Median individual income was \$26,000 - 27,999 while median household income was \$50,000 - 54,999. Two in three owned their residence, while one in three were renters. The sample was compared to the Statistics Canada 1996 Census Age Profile in Alberta for age and found to be adequately representative.1

<sup>&</sup>lt;sup>1</sup> Diane Dennis, 1999. The 1998 Alberta Survey Sampling Report. Alberta/Edmonton Series Report No. 88. Population Research Laboratory, University of Alberta, Edmonton, Alberta.

#### 3. Contact with Persons with HIV or AIDS

In 1998 and 1996, respondents were asked if they have personally known anyone with HIV or AIDS. Similarly, respondents to the 1994 and 1990 surveys were asked "Have you ever personally known anyone with AIDS or the AIDS virus?" Table 1 shows that 20% of adult Albertans in 1998 have known someone with HIV or AIDS compared to 18% in 1996, 16% in 1994 and 9% in 1990. In other words, Albertans are increasingly likely to have had contact with someone with HIV or AIDS.

TABLE 1

Percentage of Respondents Who Have
Personally Known Anyone With HIV or AIDS,
1998, 1996, 1994 and 1990

Known Anyone	1998	1996	1994	1990	
With HIV or AIDS	%	%	%	%	
Yes	20	18	16	9	
No	80	82	84	91	
Total (n)	100	100 (1178)	100 (1255)	100	

Chi-Square = 64, df = 3, p < .001

### 4. Protecting Self From HIV Infection

Respondents in 1998 and 1996 were asked "Do you know how to protect yourself from HIV infection?" If a respondent answered "yes," he or she was then asked "How (do you protect yourself from HIV infection)?" and up to three responses were recorded. Table 2 shows that, in 1998, 97% of respondents said that they knew how to protect themselves from HIV infection, compared to 92% in 1996. Table 3 shows that responses in 1998 to the question "How (do you protect yourself from HIV infection)?" dealt primarily with sexual behaviour. Indeed, the single most common answer focused on the use of condoms (32% of first responses) and on safer/protected sex (16% of first responses). Other relatively frequent responses regarding sexual behaviour mentioned abstinence, monogamy, and knowing one's sexual partner as ways of protecting oneself from HIV infection. Respondents also mentioned the use of precautions such as avoiding body fluids and wearing gloves, and avoiding injection drug use or not sharing needles.

TABLE 2

Percentage of Respondents Who Say That They Know
How to Protect Themselves From HIV Infection,
1998 and 1996

Know How to Protect Self From HIV Infection	1998 %	1996 %
Yes	97	92
No	3	8
Total	100	100
(n)	(1185)	(1189)

Chi-Square = 32, df = 1, p < .001

TABLE 3 Answers Respondents Gave in 1998 to the Question "How do you protect yourself from HIV infection?"

Ways Respondents Protect Themselves from HIV Infection	First Response %	Second Response %	Third Response %
Sexual Behaviour	71	51	35
Use condoms	32	20	12
Safer/protected sex (unspecified)	16	9	4
Abstinence/celibacy	11	11	6
Monogamy/one partner	7	5	4
Know sexual partner	4	7	8
Avoid gay lifestyle	-	-	-
Birth control (e.g. spermicide)	1	1	1
Use Precautions	16	18	25
Avoid body fluids	7	8	12
Wear gloves	4	8	8
Wash/cleanliness	2	1	2
Follow precaution codes at work	3	1	2
Injection Drug Use	8	22	22
Don't share needles	3	10	9
Avoid/no needles/use clean needles	3	9	9
No intravenous drugs	1	2	2
No drugs (unspecified)	1	1	2
Blood Transfusions and Testing	1	4	10
Use safe blood transfusions	1	1	4
No blood transfusions	-	$ar{2}$	3
Have blood tested/be tested	-	2	2
Other .	5	24	8
Avoid high risk behaviour	9	~ <del>**</del>	1
Be careful	1	-	1
Be educated about HIV/AIDS	î	1	3
Avoid infected people	î	_	ĭ
Avoid public washrooms	ō	1	-
Other	2	1	3
Total	100	100	100
(n)	(1123)	(797)	(346)
<b>\</b> /	(1120)	(, , ,	(0.10)

<sup>•</sup> A content analysis of responses grouped similar comments together and identified the various categories of response as indicated.
• Percentages do not always add to 100 or to subtotals due to rounding.

<sup>• &</sup>quot;-" indicates that percentage is less than 0.5%.

### 5. Testing for HIV

In 1998 and 1996, respondents were asked if they thought that selected groups of people were automatically tested for HIV. Compared to 1996, respondents in 1998 were more likely to believe (correctly) that people who give blood donations are automatically tested for HIV. Furthermore, respondents in 1998 were significantly more likely to recognize that prenatal screening for pregnant women now tests for HIV. However, compared to 1996, respondents in 1998 were also more likely to believe (incorrectly) that hospital patients, prison inmates, and persons who go to STD clinics are all automatically tested for HIV. In short, there appears to be an increasing tendency to assume that various people are automatically tested for HIV.

Table 4 shows that in 1998 two in every three respondents (66%) correctly believed that people who give blood donations are automatically tested for HIV. Twenty-two percent (22%) of all respondents incorrectly believed that blood donors are not automatically tested. Another 13% did not know if blood donors are automatically tested for HIV. Thirty-nine percent (39%) of respondents correctly believed that pregnant women are automatically tested for HIV. Forty percent (40%) incorrectly believed that pregnant women are not tested while another 20% said that they did not know.

One in every six respondents (17%) in 1998 incorrectly believed that hospital patients are automatically tested for HIV. One in four (24%) incorrectly believed that prison inmates are automatically tested. Over half of all respondents (57%) incorrectly assumed that people who go to STD clinics are automatically tested for HIV while 27% believed that they are not and another 16% did not know. Note that testing at STD clinics is by request and is not automatic.

Finally, 22% of respondents (n=265) assumed that there were other persons who are automatically tested for HIV. When asked to specify who they thought are automatically tested, 99 of the 265 respondents (37%) said health care workers/health professionals and another 24 (9%) mentioned drug users.

Respondents were also asked "Should people's blood be tested for the AIDS virus without their knowledge?" About 3% said that they did not know, over one-third (36%) said "yes" while almost two-thirds (61%) said "no." Responses in 1998 to this question were unchanged from 1996.

TABLE 4

Respondents' Answers to the Questions "Do you think the following people are automatically tested for HIV?" and "Should people's blood be tested for HIV without their knowledge?" 1998 and 1996

	Yes %	No %	DK %	(n)	*			
Are the following automatically teste	Are the following automatically tested for HIV?							
People who give blood								
1998	66	22	13	(1201)				
1996	63	23	15	(1202)				
People admitted to hospital								
1998	17	68	15	(1201)				
1996	14	70	17	(1202)				
Pregnant women								
1998	39	40	20	(1199)				
1996	28	48	23	(1202)	*			
People admitted to prisons								
1998	24	44	32	(1201)				
1996	20	48	32	(1200)	*			
People who go to STD clinics								
1998	57	27	16	(1201)				
1996	54	29	17	(1202)				
Any other people								
1998	22	59	19	(1199)				
1996	18	60	22	(1181)	*			
Should people's blood be tested without their knowledge?								
1998	36	61	3	(1194)				
1996	35	61	4	(1198)				

DK = Don't Know; \* = Chi-Square test of significance, p < .05 for df = 2.

### 6. Public Education Regarding HIV/AIDS

In 1998, respondents were asked four questions regarding schools and condoms: "Should condoms be available in senior high schools?" Should condoms be available in junior high schools?" "Should proper condom use be taught in schools?" and if yes "At which grade?" Table 5 shows that almost three of every four respondents (72%) said that condoms should be available in senior high schools. Half (50%) said that condoms should be available in junior high schools. The great majority (85%) indicated that proper condom use should be taught in schools. When asked at which grade proper condom use should be taught, more than one in every three respondents (36%) said grade seven, the first year of junior high school. Fully 65% of respondents selected the junior high school grades (7 to 9). One in five (20%) chose the elementary school years (mostly grades 4 to 6) while 15% chose the senior high school years (grades 10 to 12).

In 1998 and 1996, respondents were asked "Do you think students are getting adequate HIV and AIDS education in school (at all grade levels)?" Table 6 shows that in 1998 four out of every ten respondents (41%) said that they did not know. The remainder were evenly divided -- 29% felt that students were getting adequate HIV and AIDS education while 30% felt that students were not. The pattern of responses in 1998 and 1996 were very similar.

TABLE 5
Respondents' Answers to Several Questions
Regarding Schools and Condoms, 1998

	Yes %	No %	DK %	Total %	(n)
Should condoms be available in senior high schools?	72	24	4	100	(1192)
Should condoms be available in junior high schools?	50	46	4	100	(1193)
Should proper condom use be taught in schools?	85	13	2	100	(1191)
[If yes] At which grade?					
K-3 4-5 6 7 8 9 10 11	1 7 12 36 14 15 12 2				
Total (n)	100 (985)				

DK = Don't Know

TABLE 6
Responses to the Question "Do you think students are getting adequate HIV and AIDS education in school?" 1998 and 1996

Adequate HIV and	Yes	No	DK	Total	(n)
AIDS education	%	%	%	%	
1998	29	30	41	100	(1195)
1996	29	29	43	101	(1199)

DK = Don't Know; Chi-square = 0.8, df = 2, p > .05.

Respondents who felt that students were or were not getting adequate education on HIV/AIDS in school were asked why they felt that way. Table 7 shows the responses to this question. Persons who felt that students were getting adequate HIV/AIDS education in school emphasized the quality of the curriculum and their perceptions that young people appeared to be well-informed. Others observed that they themselves had been well-informed at school.

Persons who felt that students were not getting adequate HIV/AIDS education in school perceived that the issue was not sufficiently addressed in the school curriculum and observed that young people feel invincible. Some felt that the prevalence of HIV/AIDS, teenage pregnancy, and risky sexual behaviour indicated the inadequacy of school instruction. Others cited discomfort with discussions of HIV and AIDS as a reason for the inadequacy of HIV/AIDS instruction.

TABLE 7

Answers Respondents Gave in 1998 to the Question "Why do you think that students are or are not getting adequate HIV and AIDS education in school?"

(respondents who did not have an opinion on the adequacy of HIV/AIDS education in school are excluded)

Reasons	Education Adequate %	Education Not Adequate %
Information available/taught in curriculum Students well aware/aware of results of AIDS Personally got enough information Own/relatives'/friends' children well informed	45 20 12 4	2 0 1
From what respondent hears often discussed	3	0
Issue not adequately addressed/taught People feel invincible HIV/AIDS infection rate high Still engage in risky sexual behaviour Uncomfortable to discuss Personally did not get enough information Parental interference with curriculum More information needed in junior high school Information not accurate/students misinformed Educators not well informed/not qualified Teenage pregnancy rate still too high Own/relatives'/friends' children don't know fact More information needed in elementary school Need more relevant/realistic instruction	4 5 2 1 0 0 0 0 0 0 0 0 0	36 12 10 10 6 3 3 2 2 2 2 1
Other	5	6
Total (n)	101 (342)	100 (358)

<sup>·</sup> A content analysis of responses grouped similar comments together and identified the various categories of response as indicated.

• Percentages do not always add to 100 due to rounding.

<sup>• &</sup>quot;-" indicates that percentage is less than 0.5%.

Respondents were then asked "How effective do you think the use of a condom is to prevent getting the HIV virus through having sex?" Table 8 shows that one-third (34%) said that condoms were very effective in preventing HIV/AIDS. The majority, however, said that condoms were somewhat effective (62%) while a small percentage (3%) felt that they were not at all effective. Table 8 shows that this pattern of responses has been consistent for 1998, 1996, 1993 and 1992.

TABLE 8

Perceived Effectiveness of Condoms in the Prevention of HIV/AIDS, 1998, 1996, 1993, and 1992

Perceived Effectiveness	1998	1996	1993	1992
	%	%	%	%
Very Effective	34	33	33	32
Somewhat Effective	62	64	64	64
Not at all Effective	4	3	3	4
Total	100	100	100	100
(n)	(1122)	(1134)	(1194)	(1230)

Chi-square = 4.8, df = 6, p > .05

Respondents who said that condoms were somewhat effective or not at all effective were asked why they felt that way. Table 9 shows that these respondents tended to feel that condoms were no guarantee because of possible breakage, defects, or leakage. Furthermore, many observed that "nothing is foolproof" and that "accidents can happen."

TABLE 9

Answers Respondents Gave in 1998 to the Question "Why do you think that a condom is somewhat effective or not at all effective?" (excluding persons who think that condoms are very effective)

Reasons Why Condoms Somewhat or	First Response	Second Response
Not at all Effective	%	%
No Commentes	79	770
No Guarantee	79	78
Can break/rip/fail	32	24
Nothing foolproof	23	7
Could be defective	7	16
Leakage	4	8
AIDS/HIV transmitted other ways	3	5
Only abstinence effective	2	7
Not effective for pregnancy, so not effective Al	DS 2	7 5 3 2
Accidents can happen	2	3
Better than nothing	2	
Virus goes through condom	2	1
Brings down risk	1	-
Condoms work most of the time	-	0
Use	13	21
Improper use	7	17
OK if used properly	4	1
Only as safe as user	2	2
People/kids don't use condoms	1	-
Other	8	1
Condoms provide barrier/protection	5	1
Heard not effective/not very effective	3	-
Other	1	0
Total	100	100
(n)	(722)	(251)

<sup>•</sup> A content analysis of responses grouped similar comments together and identified the various categories of response as indicated.

<sup>•</sup> Percentages do not always add to 100 or to subtotals due to rounding.

<sup>• &</sup>quot;-" indicates that percentage is less than 0.5%.

In 1998, 1996 and 1993, respondents were asked if they thought that frank messages to encourage people to change sexual behaviours through which HIV infection can be spread should appear in selected media. Table 10 shows that 92% of respondents in 1998 endorsed the placement of frank messages on the Internet. Similarly, a substantial majority felt that frank messages should appear in newspapers (90%), television (87%), radio (86%), posters (86%), transit ads (79%), and billboards (72%). These figures were consistent with the figures for 1996 and 1993 increasing significantly only for posters and transit ads.

Some respondents also mentioned other places where they felt that frank messages should appear. The most frequently mentioned were schools, "everywhere," magazines and other media, medical settings (such as doctors' offices, hospitals, and clinics), public washrooms, bars/night clubs/restaurants, and shopping malls/stores. Finally respondents in 1998 were asked if they thought that frank messages about sexual behaviors and HIV infection should *not* appear anywhere at all. Less than 1% of respondents (n=10) said that such messages should not appear at all.

TABLE 10

Percentage of the Public Who Think Frank Messages to Encourage People to Change Sexual Behaviours Through Which HIV Infection Can be Spread Should Appear In Selected Media, 1998, 1996 and 1993

Medium	1998	dorsing Use	1993	
	%	%	% *	
Internet	92	92	NA	
Newspapers	90	91	91	
Television	87	89	86	
Radio	86	87	85	
Posters	86	84	82 *	t
Transit Ads	79	76	74 *	
Billboards	72	71	72	
Other Places	31	28	32	
(n)	(1116-1170)	(1090-1176)	(1220-1263)	

<sup>\* =</sup> Chi-square significant at p < .05 for df = 2.

Respondents in 1998 were asked "Where is information available on HIV/AIDS?" Table 11 shows respondents' answers to this question. Respondents indicated that information on HIV/AIDS was available from a health centre, medical clinic, doctor's office, hospital, or drug store. In addition, in 1998 respondents were asked "Are pamphlets a useful resource to learn about HIV/AIDS?" Ninety percent (90%) said yes, 8% said no, and 2% indicated that they did not know.

TABLE 11
Places Where Respondents Said Information
Was Available on HIV/AIDS, 1998

Places Information Available on HIV/AIDS	First Answer %	Second Answer %
Health/Medical Clinic/Centre Doctor's Office/Dentist's Office Hospital Drug Store/Pharmacy STD Clinic Health Department/Board of Health AIDS Association/Society Library/Books School/University/College Radio/TV/Media Internet Magazines/Phone Book Work Place Red Cross	33 29 7 3 2 1 2 4 3 4 2 2	25 21 14 6 4 1 1 6 6 4 3 1
Other Don't Know	4 5	7
Total (n)	1 <b>01</b> (1195)	100 (882)

Percentages may not add to 100 due to rounding. "-" indicates that percentage is less than 0.5%.

Finally, respondents in 1998 and 1995 were asked "Should Alberta Health provide more, less, or about the same public health messages on the prevention of HIV?" Table 12 shows public opinion regarding the appropriate level of public health messages provided by Alberta Health on the prevention of HIV/AIDS. The majority (63%) of respondents in 1998 felt that Alberta Health should provide more public health messages, up significantly from 1996. Most other respondents (36%) in 1998 felt that Alberta Health should continue to provide the same level of public health messages.

TABLE 12

Public Opinion Regarding the Appropriate Level of Public Health Messages Provided by Alberta Health on the Prevention of HIV/AIDS, 1998 and 1995

	1998 %	1996 %	
Should Alberta Health Provide More, Less, or About the Same Public Health Messages on the Prevention of HIV/AIDS?			
More Same	63 36	56 42	
Less	1	3	
Total	100	101	
(n)	(1096)	(1170)	

Percentages may not add to 100 due to rounding. Chi-square = 20, p < .05, df = 2.

## 7. Care and Support of Persons with HIV or AIDS

In 1996, all respondents were asked "What do you think are the barriers to people with HIV or AIDS receiving care and support in their community?" In 1998, a similar but different question was posed. In 1998, respondents were asked "Are there barriers to people with HIV or AIDS receiving care and support in your community (yes, no)? Those persons who said yes were then asked "What are these barriers?" and up to two responses were recorded.

In 1998, 15% of respondents answered yes to the question "Are there barriers to people with HIV or AIDS receiving care and support in your community?" Another 41% said no while 44% indicated that they did not know. The 15% of respondents answering yes were asked to identify up to two barriers. Table 13 shows that the principal barriers identified included prejudice, discrimination, stigmatization, fear, lack of knowledge, lack of education, lack of medical facilities and lack of funding for health care.

TABLE 13

Responses to the Question
"What are the barriers to people with HIV or AIDS receiving care and support in your community?" 1998

Perceived Barriers	First Response %	Second Response %
Prejudice/Discrimination/Stigmatization	42	25
Fear	18	27
Lack of Knowledge/Education	15	20
Lack of funding/medical facilities	14	18
Embarrassment	7	4
Other	4	7
Total	100	101
(n)	(168)	(89)

Percentages may not add to 100 due rounding.

#### 8. Conclusion

The 1998 HIV/AIDS issues survey had two objectives. The first was to assess the opinions and perceptions of adult Albertans with respect to a number of HIV/AIDS issues. The second objective was to assess change in opinions and perceptions by comparing responses from the 1998, 1996, 1995, 1994, 1993, 1992 and 1990 HIV/AIDS issues surveys, where appropriate. A review and discussion of the findings follows. Survey questions unique to 1998 are discussed first. Questions repeated from previous surveys are then discussed.

In 1998, respondents were asked whether or not condoms should be available in schools and whether or not proper condom use should be taught in schools. Three out of every four respondents said condoms should be available in senior high schools and half said that condoms should be available in junior high schools. The great majority of respondents endorsed teaching proper condom use in schools and most said that such teaching should begin in junior high school. It appears that the public generally endorses the role of the school in instructing young people about condom use and in making condoms available to students.

In 1998, respondents were asked if they thought that pamphlets were a useful resource to learn about HIV/AIDS. The great majority of respondents said that pamphlets were a useful resource.

Furthermore, most respondents indicated that information on HIV/AIDS was available particularly from various medical settings.

In 1998, respondents were asked if there were barriers in their own community to the care and acceptance of persons with HIV or AIDS. (While a similar question was asked in 1996, the 1996 and 1998 questions are not directly comparable.) A relatively small percentage (15%) said that there were barriers such as prejudice, fear, ignorance or lack of health care facilities.

The remaining issues were examined in the 1998 survey and also on a previous survey or surveys. Change was evident for the following questions. First, Albertans from 1990 to 1998 have become increasingly likely to have personally known someone with HIV or AIDS. Second, virtually all Albertans in 1998, even more than in 1996, indicate that they know how to protect themselves from HIV infection. Third, there appears to be an increasing tendency to incorrectly assume that various persons other than blood donors are automatically tested for HIV. Finally, there appears to be an increasing willingness to endorse the placement of frank public health messages about HIV in various media and to endorse the increased involvement of Alberta Health in providing such messages.

On other issues, continuity rather than change is striking. For example, most respondents continue to be concerned that students

may not be getting adequate HIV and AIDS education in school. Similarly, most respondents continue to feel that condoms are either somewhat or very effective in the prevention of HIV/AIDS. Indeed, opinions on the effectiveness of condoms have remained unchanged throughout the 1990s.

Substantial proportions of the respondents to the 1998 and 1996 surveys had misconceptions about automatic testing for HIV infection. For example, some incorrectly thought that blood donors or expectant mothers were not automatically tested, while others incorrectly thought that hospital patients, prison inmates, and clients of STD clinics were automatically tested. Furthermore, substantial proportions of respondents indicated that they did not know if these persons were automatically tested or not. There appears to be a need to educate the public better regarding who is tested for HIV infection and under what circumstances they are tested.

One-third of respondents in the 1998 and 1996 surveys endorsed testing for the AIDS virus without the knowledge of the person being tested. Testing without consent and, presumably, without the promise of confidentiality raises a number of concerns regarding ethics and civil rights. The public's on-going willingness to overlook these issues is striking and indicates a continuing concern on the part of the public that HIV/AIDS be monitored closely in order to prevent its spread.

HIV/AIDS Issues: 1998

#### **APPENDIX 1**

# Questions Asked on the 1998, 1996, 1995, 1994, 1993, 1992 and 1990 Surveys

Questions (The vertical bars identify similar questions asked in different survey years)	'98	'96		urve '94	-	'92	'90
Known Anyone with AIDS							
Have you personally known anyone with HIV or AIDS? (yes, no)	x						
Have you personally known anyone with AIDS or HIV? (yes, no)		x					
Have you ever personally known anyone with AIDS or the AIDS virus? (yes, no)				x			x
Chances of Getting the AIDS Virus							
What do you think your chances are of getting HIV or AIDS? High, medium, low, or none?		x					
What are your chances of getting the AIDS virus? Do you think they are high, medium, low, or none?							x
What do you think your chances are of getting the AIDS virus? Do you think they are high, medium, low, or none?			x	x		x	
Why do you think that? (Probe) (Record up to two answers)		x		x		x	
If you did get HIV or AIDS what do you think is the most likely way that you would have contracted the virus? (Probe) (Up to two answers coded)		x					
If you did get AIDS what do you think is the most likely way that you would have contracted the virus? (Probe) (Record up to two answers)			x				
Do you know how to protect yourself from HIV infection? (yes, no)	x	x					
(If yes) How? (Record up to three responses)	x	x					

Survey Questions '98 '96 '95 '94 '93 '92 '90 Testing What kinds of situations in your personal life would lead you to get a blood test for HIV/AIDS? (Indicate order in which mentioned, e.g. 1, 2) - blood transfusion - as a blood donor - spouse/partner unfaithful - new relationship/multiple partners - forced to get one (e.g. insurance) - drug use - unprotected sex - other (specify) If you thought you were at risk of HIV/AIDS where would you go for an HIV/AIDS test?  $\mathbf{x}$ - my (family) doctor - a doctor - medical/health clinic - Red Cross - STD clinic - other (specify) Have you ever been tested for HIV (AIDS)? (yes, no)  $\mathbf{x}$ Have you ever had a test for infection with the AIDS virus? (yes, no)  $\mathbf{x}$ x (If tested) Why did you have the test for the AIDS virus? · for my own information · my doctor thought I needed to have it done · when I went into a hospital or was having a surgical procedure · as a requirement for life insurance · as a requirement for health insurance · I was donating blood other (specify) (If tested) When you had the AIDS test for infection with the AIDS virus, did anyone talk to you about the test? (Most recent test) (ves. no) (If yes) Who talked to you about it? (Circle all that apply) - a health professional - someone from the insurance company - other (specify)

Questions	'98	'96		urve '94	'93	'92	'90
(If yes) What specific things did they tell you? (Record up to two answers)						х	
(If tested) Did you <u>want</u> the results of the test? (yes, no, uncertain)						x	
(If no) Why didn't you (want the results of the test)? (Record answer)						x	
(If tested) Did you get the results of your test? (yes, no)						x	
(If yes) Were the results given in person, by telephone, by mail, or in some other way (specify)?						x	
When you received the results of your test, did anyone talk to you about the results? (yes, no)						x	
(If yes) Who talked with you about this? (Circle all that apply) - a health professional - someone from the insurance company - other (specify)						х	
(If yes) What specific things did they say about the results? (Record up to two answers)						х	
(If you did not get the results of your test) Why did you not get the results (for your AIDS test)? (Record answer)						x	
Do you expect to have a blood test for infection with the AIDS virus in the next 12 months? (yes, no)				x			x
Do you expect to have a blood test for HIV (AIDS) in the next 12 months? (yes, no)			x				
Please tell me your opinion on the following statement: Employers should have the right to require an employee to be tested for the AIDS virus. (strongly agree, agree, disagree, strongly disagree)							x

Questions	'98	'96		urve '94	-	'92	'90
AIDS has been described as one of the major health problems in the country. A study may be done and blood samples taken to find out just how widespread the problem is.							
a. If you were selected in this national sample of people to have their blood tested with assurances of privacy of test results, would you have the test? (yes, no)							x
<ul> <li>b. If you had your blood tested, would you insist on knowing the results? (yes, no)</li> </ul>							x
c. Should people's blood be tested for the AIDS virus without their knowledge that it was being done? (yes, no)	x						x
Should people's blood be tested for the AIDS virus without their knowledge? (yes, no)		x					
Please tell me if you think any of the following people should be tested for HIV (1995) / AIDS (1990), even if they do not give consent? (Read) (yes, no)							
Recipients of blood transfusions Blood donors and organ donors (e.g. kidneys) Patients entering hospital Health care workers Expectant mothers The military and airline pilots Homosexuals (gay men) Bisexual men Prostitutes (male or female) Injection drug users			x x x x x x x x x x				x x x x x x x
Any others? (specify)  Do you think the following people are automatically tested for HIV? (Read) (yes, no)			x				x
People who give blood donations People admitted to hospital Pregnant women People admitted to prisons People who go to STD (sexually transmitted diseases) clinics Any other people? (If yes) Who else (do you think) is automatically tested?	x x x x x	x x x x					

	Survey						
Questions	'98	'96	'95	'94	'93	'92	'90
Knowledge							
In your estimation, what percentage of people who now have the AIDS virus <u>will eventually get sick</u> with AIDS? Would it be less than 10%, 10 to 49%, 50 to 89%, or 90 to 100%?							x
In your estimation, what percentage of people who now have the AIDS virus are actually sick with AIDS? Would it be less than 10%, 10 to 49%, 50 to 89%, or 90 to 100%?							x
Please tell if you think the following statement is definitely true, probably true, probably false, or definitely false: A person can be infected with the AIDS virus and <u>not</u> look sick. (Repeat categories)			x	x		x	
Opinions							
Please tell me how much you agree or disagree with these statements: (1=strongly disagree, 7=strongly agree)							
<ul> <li>a. Most AIDS victims deserve what they got (i.e. the AIDS disease).</li> </ul>							x
<ul> <li>b. If a child with AIDS were to attend my child's school, I would take my child out of the school.</li> </ul>							x
<ul> <li>c. People who get AIDS deserve first class health care.</li> </ul>							x
(If 5, 6 or 7) Is that the case regardless of what it costs? (yes, no)							x
We'd like to know (1996) We need to know (1993) where people think it would be acceptable for the public to buy (1993) to buy or have access to (1996) condoms. I'm going to read a list of places. Please tell me whether you think condoms should be sold there (1993) should be sold in each of them (1996).							
- In gas (1996) service (1993) stations? (yes, no)		x			x		
In service stations, should they be sold at the counter, available from machines in washrooms, or both?							
m washrooms, or bout?					х		

Questions	Survey '98 '96	'95	'94	'93	'92	'90	
- (Should condoms be sold) in restaurants? (yes, no)	x			x			
In restaurants, should they be sold at the counter, available from machines in washrooms, or both?				x			
- Should condoms be sold in bars and lounges? (yes, no)				x			
In bars and lounges, should condoms be sold at the counter, available from machines in washrooms, or both?				x			
- (Should condoms be sold) in 24-hour convenience stores? (yes, no)	x			x			
In 24-hour convenience stores, should condoms be sold at the counter, available from machines in washrooms, or both?				x			
- Should condoms be sold in senior high schools (grades 10-12)? (yes, no)				x			
- Should condoms be sold in workplaces? (yes, no)				x			
- In arcades (refers to video arcades) (yes, no)	x						
- (In) public areas in shopping malls (yes, no)	x						
- In community centres (i.e. ice rinks) (yes, no)	x						
Would you be comfortable buying condoms in the places just listed:							
a. Over the counter (asking for them)? (yes, no)	x						
b. From a vending machine? (yes, no)	x						
<ul> <li>Where else should condoms be available?</li> <li>(Indicate order in which mentioned, e.g. 1, 2)</li> <li>drugstore</li> <li>doctor's offices/clinics</li> <li>hotels/motels</li> <li>airports/bus depots</li> <li>other (specify)</li> </ul>				x			

	Survey						
Questions ·	'98	'96	'95	'94	'93	'92	'90
Should condoms be sold, be available for free, neither, or both, from vending machines in seniors high schools (grades 10-12)? (sold, available free, neither, both)		x					
Should condoms be available in senior high schools? (yes, no)	х						
Should condoms be available in junior high schools? (yes, no)	x						
Education							
In many Alberta communities there are people who have HIV infection or AIDS. What can be done to encourage your community to accept without discrimination members of your community who have HIV/AIDS?  (PROBE FOR SPECIFICS, PARTICULARLY IF RESPONSE IS "EDUCATION".							
Record up to three answers.)		х			х		
What do you think are the barriers to people with HIV or AIDS receiving care and support in their community? (PROBE. Record up to two answers.)		х					
Are there barriers to people with HIV or AIDS receiving care and support in your community? (yes, no)	x						
(If yes) What are these barriers? (Probe) (Record up to two answers)	x						

			S	urve	y			
Questions	'98	'96	'95	'94	'93	'92	'90	
In schools, at what grade (kindergarten through 12) should education start about each of the following? (Randomized)								•
<ul><li>Sexual health</li><li>HIV infection and AIDS</li><li>Birth control</li></ul>			X X		X X			
- Other sexually transmitted diseases			x x		x x			
Should proper condom use be taught schools? (yes, no)	х							
(If yes) At which grade? (7, 8, 9, 10, 11, 12, other - specify)	х							
Do you think students are getting adequate HIV and AIDS education in school (1996: elementary to Grade 12)? (1998: at all grade levels)?								
(yes, no, don't know)	Х	x						
(If yes or no) Why do you think that?	X	x						
In public health messages on the prevention of HIV/AIDS and other sexually transmitted diseases, should there be more, less or about the same emphasis on abstinence from sexual intercourse?					x			
Should there be more, less or about the same emphasis (in public health messages) on the use of condoms?					x			
(More specifically,) should there be more, less, or about the same emphasis on condom use:								
- on television? more, less, or about the same?					x			
<ul> <li>more, less, or about the same emphasis on condom use in newspapers and magazines?</li> </ul>					x			
- in pamphlets available in public places such as drugstores and supermarkets? more, less, or about the same?					x			
- in senior high school classroom instruction (grades 10-12)? (READ) more, less, or about the same?		x	x		x			
- in junior high school classroom instruction (grades 7-9)? (READ) more, less, or about the same?		x	x		x			
38								

	Survey								
Questions	'98	'96	'95	'94	'93	'92	'90		
Are pamphlets a useful resource to learn									
about HIV?AIDS? (yes, no)	х								
Where is information available on HIV/AIDS?	x								
If you wanted a pamphlet on HIV or AIDS,									
do you know where to get one? (yes, no)		x							
(If yes) Where would that be?		x							
Where would you prefer to obtain a pamphlet?									
(PROMPT IF REQUIRED, e.g. in a drug store,									
libraries, doctor's office, health clinics.)		x							
Research in Alberta has shown that people need									
frank messages to encourage them to change									
sexual behaviours through which HIV infection									
can be spread. Do you think these frank messages									
should appear on:									
- television?	x	X			X				
- radio?	x	X			X				
- newspapers?	x	x			X				
- transit ads (e.g. bus, LRT, etc.)?	x	X			X				
- posters?	x	X			X				
- billboards?	X	X			X				
- Internet?	x	X							
- any other places? (specify)	x	X			X				
- should not appear at all? (yes, no)	Х								
Should Alberta Health (provincial government									
department) provide more, less, or about the									
same public health messages on the prevention									
of HIV/AIDS? (1996) HIV? (1998)	x	х							

		S	urve	y		
98	'96	'95	<b>'94</b>	'93	'92	'90

Questions

People responsible for providing HIV/AIDS messages need to know how well the public understands certain terms, and the risk of spreading HIV/AIDS. For the following please tell me if you are very sure or uncertain about the meaning.

or	uncertain about the meaning.	
	How sure are you of what "saliva" is? Are you very sure or uncertain?	x
	(If very sure) How likely is it that HIV infection can be spread by saliva? Very likely, somewhat likely, not at all likely?	x
	How sure are you of what "semen" is? Are you very sure or uncertain?	x
	(If very sure) How likely is it that HIV infection can be spread by semen? Very likely, somewhat likely, not at all likely?	x
	How sure are you of what "monogamy" is? Are you very sure or uncertain?	x
	(If very sure) How likely is it that HIV infection can be spread through monogamy? Very likely, somewhat likely, not at all likely?	x
	How sure are you of what "pre-ejaculate" is? Are you very sure or uncertain?	x
	(If very sure) How likely is it that HIV infection can be spread by pre-ejaculate? Very likely, somewhat likely, not at all likely?	x
	How sure are you of what "vaginal secretions" mean? Are you very sure or uncertain?	x
	(If very sure) How likely is it that HIV infection can be spread by vaginal secretions? Very likely, somewhat likely, not at all likely?	x
	How likely is it that HIV infection can be spread by <u>blood</u> ? Very likely, somewhat likely, not at all likely?	x

Survey '98 '96 '95 '94 '93 '92 '90

Questions

#### Risk Factors and Condom Usage

I am going to read a list of statements. Please tell me after I finish all of the statements if <u>at least one</u> is true for you.

- a. You have used drugs by needle at any time since 1977.
- b. You have haemophilia and have received clotting factor concentrates since 1977.
- c. You are a man who has had sex with another man at some time since 1977, even one time.
- d. You have had sex for money or drugs at any time since 1977.
- e. Since 1977, you are or have been the sex partner of any person who would answer yes to any of the items I've just read.

Were any of the statements I read true for you? (yes to at least one, no to all of them)

Now I am going to read a list of statements that might apply to you. Please tell me after I finish with all of the statements, if at least one would be true for you at any time since the early 1980s.

- You have injected drugs or shot up, including steroids, during that time.
- · You took part in anal sex.
- It is likely that any person with whom you had sex, had previously injected drugs, including steroids.

	Were any of the statements I read true for you?
l	(ves to at least one, no to all of them)

Have you ever injected drugs? (yes, no)

(If yes) Since 1978, have you ever shared needles? (yes, no)

(If yes) Did you clean the needles with bleach every time?

(If ever injected drugs) In the past 12 months did you inject drugs? (yes, no)

(If shared needles since 1978) Did you share needles in the past 12 months? (yes, no)

x

х

 $\mathbf{x}$ 

 $\mathbf{x}$ 

 $\mathbf{x}$ 

	Survey						
Questions	'98	'96	'95	'94	'93	'92	'90
(If yes) Did you clean the needles with bleach every time in the past 12 months? (yes, no)			x				
(If shared needles since 1978) Did you go to a needle exchange program in the past 12 months? (yes, no)			x				
In the last <u>two years</u> have you had sex with <u>at least one new partner?</u> (yes, no)				x		х	x
(If new partner) How many new partners did you have?							<b>x</b> .
(If new partner) In total, how many partners have you had in the last two years?				x		х	
(If new partner) (Ask males only) Were all your partners/Was your partner female or male, or some female and some male?				x		х	
(If new partner) (Ask females only) Were all your partners/Was your partner male or female, or some female and some male?				x		x	
(If new partner) Did you use a condom all of the time, most of the time, some of the time or not at all?							x
(If new partner) Did you and your partner(s) always use a condom, never use a condom, or sometimes use a condom?				x		x	
(If never or sometimes use a condom) Why didn't you and your partner(s) use a				^		^	•
condom (all of the time)? (Record up to two answers)				x		х	
How many people have you had sex with in the last two years?			x				
(If one or more sex partners) (Ask males only) Were all your partners/Was your partner female or male, or some female and some male?			x				
(If one or more sex partners) (Ask females only) Were all your partners/Was your partner male or female, or some female and some male?			x				

Questions	Survey '98 '96 '95 '94 '93 '92 '90
(If one sex partner) Was your partner a casual partner? (yes, no)	х
(If no) How often did you use a condom with your "usual" sex partner? Always, sometimes, or never?	x
(If yes) How often did you use a condom with your "casual" sex partner? Always, sometimes, or never?	x
(If two or more sex partners) How often did you use a condom with your "usual" sex partner(s)? Always, sometimes, or never?	x
(If two or more sex partners) How often did you use a condom with your "casual" sex partner(s)? Always, sometimes, or never?	x
(If condom use was always or sometimes) When you used condoms, what were the reasons? (Record up to three answers)	x
(If condom use was sometimes or never) What was your <u>MAIN</u> reason for not using condoms each time you had sexual intercourse? (Do not read)	
Didn't always have one available Want to have a child Condoms are not natural Condoms don't feel good/don't fit Too embarrassed to buy them	x
Too expensive Use other method of contraception Interrupted lovemaking/spoiled the mood	
Against religion to use contraception Partner did not ask me to use one Other (Specify)	
(If one or more sex partners) Think of your sex partner(s) in the past 12 months. Did your partner/Did any of your partners (usual	

Questions	'98	'96	urve '94	ey '93	'92	'90
How <u>effective</u> do you think condoms are to prevent getting the HIV/AIDS virus through having sex? very effective, somewhat effective, not at all effective?				x		
How effective do you think the use of a condom is to prevent getting the HIV virus (1998) AIDS virus (1992) HIV/AIDS virus (1996) through having sex? (i.e. to prevent sexual transmission of the HIV/AIDS virus added in 1996 only.) (READ) very effective, somewhat effective, not at all effective?	x	x			x	
(If somewhat effective or not at all effective) Why do you think that?	x	х			x	

The vertical bar means that a question similar in wording was used in the years indicated. All versions of similar questions are shown.

# APPENDIX 2

# The 1998 HIV/AIDS Issues Survey Questions

# THE NEXT SET OF QUESTIONS ARE ABOUT HIV/AIDS.

VAR134	20.		Have you personally known anyone with HIV or	r AIDS?
			Yes No Don't know No response	2 3
VAR135	21.	a.	Do you know how to protect yourself from HIV	infection?
			Yes (ask Q21b) No (go to Q22) Don't know No response	2 3
VAR136 VAR137		b.	How? (PROBE) (Record up to 3 responses)	
VAR138			see APPENDIX 2A for codes	
	22.		Do you think the following people are automatic HIV?	cally tested fo
VAR139		a.	People who give blood donations?	
·			Yes  No  Don't know  No response	2 3
VAR140		b.	People admitted to hospital?	
			Yes No Don't know No response	2 3
VAR141		c.	Pregnant women?	
			Yes  No  Don't know  No response	2 3

VAR142		d.	People admitted to prisons?
			Yes       1         No       2         Don't know       3         No response       0
VAR143		e.	People who go to STD (sexually transmitted disease) clinics?
			Yes
VAR144	23.		Do you think any other people are automatically tested?
			Yes (ask Q23b)       1         No (go to Q24)       2         Don't know       3         No response       0
VAR145		b.	Who else (do you think) is automatically tested? (Probe)
			see APPENDIX 2B for codes
VAR146	24.		Should people's blood be tested for the HIV without their knowledge that it was being done?
			Yes       1         No       2         Don't know       3         No response       0
VAR147	25	a.	Should condoms be available in senior high schools?
			Yes
VAR148		b.	Should condoms be available in junior high schools?
			Yes       1         No       2         Don't know       3         No response       0
VAR149		c.	Should proper condom use be taught in schools?
			Yes (ask Q25d)       1         No (go to Q26a)       2         Don't know (go to Q26a)       3         No response (go to Q26a)       0

VAR150		d.	At which grade?
			Kindergarten to Grade 3.       1         Grade 4/Grade 5.       2         Grade 6.       3         Grade 7.       4         Grade 8.       5         Grade 9.       6         Grade 10.       7         Grade 11.       8         Grade 12.       9         Other (not coded elsewhere)       10         Don't know       11         Not applicable       99         No response       00
VAR151	26.	a.	Are there barriers to people with HIV or AIDS receiving care and support in your community?
			Yes (ask Q26b)
VAR152 VAR153		b.	What are these barriers? (Probe) (Record up to two answers).
			see APPENDIX 2C for codes
VAR154 VAR155	27.	a.	Where is information available on HIV/AIDS? (Record up to two answers).
			see APPENDIX 2D for codes
VAR156		b.	Are pamphlets a useful resource to learn about HIV?AIDS?
			Yes       1         No       2         Don't know       3         No response       0
VAR157	28.	a.	Do you think students are getting adequate HIV and AIDS education in school (at all grade levels)?
,			Yes
VAR158 VAR159		b.	Why do you think that? (Record up to two answers).
			see APPENDIX 2E for codes

VAR160	29.	a.	How effective do you think the use of a condom is to prevent getting the HIV virus through having sex? (READ)
			Very effective (go to Q30)
			Don't know how effective (volunteered) (go to Q30) 4 Don't know method (volunteered) (go to Q30) 5 No response (go to Q30) 0
VAR161 VAR162		b.	Why do you think that (a condom is somewhat/not at all effective)? (Record up to two answers).
			see APPENDIX 2F for codes
	30.		Research in Alberta has shown that people need frank messages to encourage them to change sexual behaviours through which HIV infection can be spread. Do you think these frank messages should appear on:
VAR163		a.	television?
			Yes.       1         No.       2         Don't know.       3         No response.       0
VAR164		b.	radio?
			Yes
VAR165		c.	newspapers?
			Yes
VAR166		d.	transit ads (e.g. bus, LRT, etc.)?
			Yes

VAR167	e.	posters?	
		Yes No Don't know No response	2
VAR168	f.	billboards?	
		Yes No Don't know No response	. 2
VAR169	g.	Internet?	
		Yes No Don't know No response	. 2
VAR170	h.	any other places (If yes, specify)?	
		NoDon't knowNo response	. 3
		Magazines/books Pamphlets/brochures/newsletters/ direct mail Bumper stickers Film/video/CD-ROM/tapes Skywriting/blimps Other media Bars/night clubs/restaurants. High schools Schools (general) Doctor/dentist office/hospital/clinic Public washrooms Workplaces Movie theatres. Public meetings/forums/community halls Shopping mall/stores/supermarkets/ drugstores	12 13 14 15 19 20 21 22 23 24 25 26
		Hotels/motels Churches In home by parents No other place Other locations	29 30 31 32 39
		Everywhere/anywhere	40

VAR171		i.	[Ask if respondent said "no" to questions 30a to h] should not appear at all?
			Yes (specify)       1         No.       2         Don't know       3         No response       0
VAR172	31.		Should Alberta Health (provincial government department) provide MORE, LESS, or ABOUT THE SAME public health messages on the prevention of HIV?
			More       1         Less       2         About the same       3         Don't know (volunteered)       4         No response       0

#### APPENDIX 2A

# Question 21b (VAR136, VAR137 VAR138)

# How do you protect yourself from HIV infection?

-	
01	Safe sex (unspecified)
02	Protected sex (unspecified)
03	Abstinence/No sex/Celibate
04	Use condoms
05	Birth control methods (foam, spermicide, diaphragm)
11	Monogamous/one partner
12	Know sexual partner/avoid indiscriminate sexual activity/no prostitutes
13	Avoid gay lifestyle
21	No blood transfusions
22	Bank own blood, family blood for transfusions/know blood is safe
23	Do not have blood tested
24	Avoid needles/no needles/use clean needles
25	Don't share needles
26	Have blood tested/be tested
31	Wear gloves/ mask
32	Wash/cleanliness/ hygiene
33	Avoid contact with body fluids
34	Follow universal precaution procedures at work
41	No drugs (not specified)
42	Don't use intravenous drugs
50	Avoid high risk behaviour/lifestyle (unspecified)
51	Avoid infected people/stay in house
52	Be careful/careful living/use common sense
53	Avoid public washrooms
54	Avoid restaurants
60	Education/be educated about disease (HIV/AIDS)
87	Other (not coded elsewhere)
98	No second/third response
99	Not applicable
00	No response (all three variables coded 00)

#### APPENDIX 2B

#### Question 23b (VAR145)

# Who else (do you think) is automatically tested (for HIV)?

11	Food handlers	
12	Everybody	
13	Public service workers	
14	Associates of AIDS victims (family, co-workers, etc.)	
15	Day care/child care workers	
16	Youth	
17	Immigrants/refugees	
18	Children born to mothers with HIV	
19	Teachers	
20	Sex offenders	
21	Health professionals	
22	Marriage license applicants	
23	Prostitutes/promiscuous people	
24	Prisoners/people in police custody	
25	Priests	
26	Haemophiliacs/people with any blood disease	
27	People working with blood	
28	Travellers to foreign countries	
29	Alcoholics	
30	Lesbians/homosexuals	
31	·	
32	Pregnant women	
33	Drug user's children/prostitute's children Politicians/government officials/government workers	
34	Librarians	
35	Hostel workers	
36		
37	Anyone in a high risk field	
38	Diabetics	
39	Dancers/actors/strippers/other (such) professionals	
40	Anyone sexually active	
41	Military	
41	Drug users Haspital/haslth care workers	
43	Hospital/health care workers	
43 44	Organ donors	
44 45	Athletes  People with symptoms of HIV/AIDS	
	People with symptoms of HIV/AIDS	
46	Insurance purchasers	
47	Blood recipients	
48	Sexual assault victims	
49	Anyone undergoing surgery/medical treatment or dental work	
50	Mentally handicapped	
51	Anyone requesting it	
52	Elderly	
53	Anyone who gets a blood test	
54	Job applicants/workers in certain occupations (not specified)	
96	Response not applicable to question	
99	Not applicable	

#### APPENDIX 2C

#### Question 26b (VAR152, VAR153)

# What are the barriers to people with HIV or AIDS receiving care and support in your community?

Fear of contact with infected people
Fear of catching disease
Prejudice (unspecified)
Stigma of the disease (unspecified)
Discrimination against gay community
Lack of acceptance/compassion
Lack of education/knowledge about the disease
Lack knowledge about transmission of disease
Embarrassment/shame/isolation of infected people
Lack of funding
Lack of hospices
Lack of medical facilities/medical staff
Don't know
None (no barriers)
Other (not coded elsewhere)
No second response
Not applicable
No response

#### APPENDIX 2D

# Question 27a (VAR154, VAR155)

#### Where is information available on HIV or AIDS?

01	AIDS Association/Society
02	STD Clinic
11	Doctor's Office/Dentist's Office
12	Hospital
13	Medical Clinic/Medical Centre
14	Anywhere medical
21	Health Center/Clinic/Unit
22	Health Department/Board of Health/Alberta Health
23	Community Health Center
24	Clinic (unspecified)
25	Government offices/agencies (eg. AADAC)
31	Drug Store/Pharmacy
32	Red Cross
41	Library/books
42	Magazines/Phone book
43	Radio/TV/Newspapers/Any media
44	Grocery/Convenience store
45	School/University/College
46	Church
47	Work place
48	Mail/Post Office
49	Coffee shops
50	Internet
51	By condom machines
70	Friends/Family members
96	Don't Know
97	Other (not coded elsewhere)
98	No Second Answer
00	No Response

#### **APPENDIX 2E**

#### Question 92b (VAR189)

# Why do you think that students are or are not getting adequate HIV and AIDS education in school (at all grade levels)?

#### YES (INFORMATION ADEQUATE)

01	Students know enough/well aware
02	Information is readily available/part of curriculum
03	Sexually active sooner
10	AIDS no longer feared
11	Teach personal responsibility
31	Personally got enough information
32	Own/relatives'/friends' children well informed
33	From what is heard/discussed/read
41	Awareness of the outcome of AIDS
42	Fewer AIDS cases

#### NO (INFORMATION NOT ADEQUATE)

50	Don't teach safe sex	
51	More detailed information for senior grades	
52	Should teach use of condoms	
53	Don't address issue adequately/not given importance	
54	Need more education by peers	
55	Parental interference in curriculum/do not want it	
	taught/barriers to instruction	
56	Need more relevant/realistic instruction	
57	Information not accurate	
58	Should teach chaste lifestyle/need moralistic information	
59	More information needed at elementary level	
60	More information needed at junior high level	
61	Personally did not get enough information	
62	Own/relatives'/friends' children do not know facts	
63	Still uncomfortable issue to discuss	
64	It is not taught in schools (e.g. separate schools)	
65	Educators not well-informed/not qualified to instruct on issue	
71	Teenage pregnancy rate still too high	
72	AIDS/HIV infection still prevalent/STDs on increase	
73	Still involved in unprotected sex/risky behaviour	
81	Fear of disease/ignorance still exists	
82	Intolerant attitude toward the disease	
83	Fear that knowledge of the disease will make matters worse	
84	People feel invincible/won't happen to them	
85	Issue over-taught	
86	Can't be stressed enough	
-	can the subsect of sugar	

#### HIV/AIDS Issues: 1998

91	Yes, but answer did not address issue
92	No, but answer did not address issue
98	No second response
99	Not applicable
00	No response

#### APPENDIX 2F

#### Question 29b (VAR161, VAR162)

#### Why do you think that a condom is somewhat or not at all effective?

01	Can break/rip/tear/fail/come off
02	Nothing is foolproof
03	Accidents can happen (general)
04	Can be defective
05	Leakage/fluid escape
06	Improper use
07	Better than nothing
08	Heard from media/others not very effective
09	Heard that condoms are somewhat effective/not the safest
10	Only abstinence is effective
11	Quality of material/depends on condom
12	Not effective for preventing pregnancy; the same for AIDS
13	Virus goes through condom fibres
14	Knowledge of use/if used properly
15	Condoms provide barrier/protection
16	AIDS/HIV transmitted other ways
17	People don't use condoms
18	Brings down risk
19	Easy to use
20	Only as safe as the user
21	Helps for some but not all
22	Works most of the time
87	Other (not elsewhere coded)
97	Don't know
98	No second answer
99	Not applicable
00	No response

#### REPENDING SE

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When do you titled that a populary is semested by link at all shifted

Not applicable



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